	-		S&H Form: PTO/SB/05 (2/01)						
	J1	UTILITY	Attorney Docket No. 1509.1016  First Named Inventor or Application Identifier: Takayuki YAMADA						
	1 32 U	PATENT APPLICATION							
	0	<u>TRANSMITTAL</u>		P					
	_	(Only for original applications)	Express Mail Label No.	4					
		APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231						
	1.  Fee Transmittal Form								
	2. Specification, Claims & Abstract[Total Pages: 20 ]								
	3. 🛛	Drawing(s) (35 USC 113)[ Total Sheets: 6	.[ Total Sheets <u>: 6</u> ] [FIGS. <u>1-6</u> ]						
	<ul> <li>4.   Oath or Declaration</li></ul>								
	5. 🔲								
	5.  Verified Statement Claiming Small Entity Status  6.  Application Data Sheet. See 37 C.F.R. 1.76								
	7. 🛛								
	8. 🔲								
	b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or II. paper c. Statement verifying identity of above copies								
	ACCON	PANYING APPLICATION PARTS							
mii II. II ii.	10. 🛮 Assignment (cover sheet & document(s)) to Enplas Corporation of Kawaguchi, Japan								
탈	for publication of assignee information under 37 CFR 1.215(b)								
	11.   37 CFR 3.73(b) Statement (when there is an assignee)  Power of Attorney								
	12.								
	13. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations								
	14. Preliminary Amendment								
	15. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)								
	16.  Certified Copy of Priority Document(s) (if foreign priority is claimed)								
	17. Request and Certification for Nonpublication under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form								
	PTO/SB/35 or its equivalent								
	18. Other:								
	19. CC	19. CORRESPONDENCE ADDRESS							
	21171 PATENT TRADEMARK OFFICE								

	NEW APPLICATION					9.1016			
	FEE TRANSMITTA	L	Application Number						
AMOUNT ENCLOSED \$ 780.00					ruary 15, 2002				
		780.00	First Named Inventor Taka			ayuki YAMADA			
CLAIMS	LATION (fees effective		(0) 11111105		_				
CLATIVIS	(1) FOR	(2) NUMBER FILED	(3) NUMBE EXTRA			(5) CALCULATIONS			
,	TOTAL CLAIMS	10 - 20 =	0	X \$ 18	= 00.	\$ 0.00			
	INDEPENDENT CLAIMS	1 - 3=	0	X \$ 84	.00 =	0.00			
	MULTIPLE DEPEN if applicable)	IDENT CLAIMS			= 00				
			F	BASIC FILING		740.00			
		<u>-</u>		Fotal of above Calculations =	:	\$ 740.00			
Surcharge for late filing fee, Oath or Declaration (37 CFF (\$130.00)					3(f))				
	Reduction by 50%	for filing by small							
			F	TOTAL FILING		\$ 740.00			
9 4	Surcharge for filing 37 CFR 1.52(d))								
	Recordation of Ass	ignment (\$40.00;				40.00			
			i i	TOTAL FEES DUE =		\$ 780.00			
METHOD OF	PAYMENT				<b>'</b>	· · · · · · · · · · · · · · · · · · ·			
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□ No payr (unless	No payment is enclosed and no charges to the Denecit Assessment are sufficient at the state of								
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	bove-noted "AMOUN zed to credit any ove	T ENCLOSED" i rpayment or cha	s not correc	t, the Commi	ssione ecessa	r is hereby ry to:			
	Deposit Account No.	19-3935							
1	Deposit Account Nan	ne STAAS &	HALSEY LL	Р					
☐ The Co	ommissioner is also authorized to credit any overpayments or charge any additional fees								
prosect	red under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the cution of this application, including any related application(s) claiming benefit hereof								
pursua:	1.53(b) and/or								
continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or such related application.									
SUBMITTED BY: STAAS & HALSEY LLP									
Typed Name	James D. Halsey, Senior Counsel			Reg. No	).	22,729			
Signature	MAT			Date		February 15, 2002			
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